Application or Docket Number													
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  09750304											04		
CLAIMS AS FILED - PART I								MALL EN		OR	OTHER SMALL E		
TOTAL CLAIMS			1 &				ſ	RATE	FEE		RATE	FEE .	
FOR			NUMBER FILED		NUMBER EXTRA			Basic Fee	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			8 minus 20=		. 0			X\$ 9=		OR	X\$18=		
NDEPENDENT CLAIMS			2 minus 3 =		. 0			X40-		OR	<b>X80</b> =		
MULTIPLE DEPENDENT CLAIM PRESENT							•	+135=		OR	+270=		
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	110.0	
_ K	CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY												
7 V	7-04	(Column 1) CLAIMS REMAINING AFTER		HIG NUM PREV	KEST KBÉA KOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	AMENDMENT	Minus .	-20	FOR	<b>=</b> Ø		X\$ 9=		OR	X\$18=	no	
MEN	independent	· a	Minus	••• (	3	<del>-</del> ()		X40=		OR	X80=	fue	
V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	Du	
•								TOTAL ADDIT. FEE		OR	YOYAI		1
10	1-21-04	(Column 1)			umn 2) HEST	(Column 3)	ı	A	1	<b>.</b>		ADDI-	4
AMENDMENT B	· .	CLAIMS REMAINING AFTER AMENDMENT		PRE	MBER MOUSLY D FOR	PRESENT EXTRA		PLATE	ADDI- TIONAL FEE		RATE	TIONAL	P
OME	Total	. 24	Minus	*	20	-4		X\$ 9=		OF	X\$18=	72	E.
MEN	Independent	· シ	Minus			-		X40=		OF	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		<b>OF</b>	+270=		
1	206/21	-05				·		YOTAL ADDIT. FEE	:	JOF		F	],
9	(Column 1) (Column 2) (Column 2)									ა —	ROF	790.0	
ပ		CLAIMS REMAINING AFTER		NI PRE	CHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	TIONA FEE	
AMENDMENT	Total	· 24	Minus		20	= 4		X\$ 9=			X\$18	724	<b>7</b> 2
NE NE	Independent	. 2	Minus	•••	<u>3`</u>	8		X40=			R X80=	1	$\cdot$
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEND					4	L	+135=	1	O	070	. PC	
١.	if the entry in colu If the "Highest Nu	mn 1 is less than	the entry in col	umn 2, 1	vrite "O" in ( "E is less ti	column 3. nan 20. emler "2	D. <b>"</b>	TOTA ADDIT, FE	<u>.                                    </u>		TOT	AL	1
	if the "Highest Ni Highest Ni The Tighest Nu	imper Previously imber Previously mber Previously I	Paid For INTI- Paid For (Total	iis spa iis spa or indep	CE is less t endent) is t	han 3, enter "3." he highast num	ber			box in			
L											DEPARTMENT	OF COMME	ACE -